

BARRY HOPKINS #DE-6473
STATE CORRECTIONAL INSTITUTION AT PHOENIX
1200 MOKYCHIE DRIVE, P.O. B. 244
COLLEGEVILLE, PA 19426

CLERK

U.S. District Court
EASTERN DISTRICT OF PENNSYLVANIA
PHILADELPHIA, PA 19106-9865

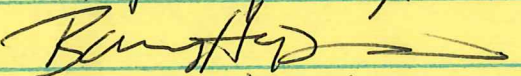
RE: Filing §1983

DEAR CLERK,

GOOD DAY TO YOU. Kindly find enclosed 1-Civil Complaint (1983)
w/Exhibits; 10 SUMMONS; AND AN Informa Pauperis petition,
with a signed /CERTIFIED RECORD of the past six months of
my prison account, ready for filing. PLEASE ALSO note
only 1-copy due to my LACK of funds.

THANK YOU, FOR YOUR time & CONSIDERATION.

Respectfully,



BARRY HOPKINS

NO. DE-6473

cc: file

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF PENNSYLVANIA

BARRY HOPKINS,
Plaintiff

TITLE 42 U.S.C. § 1983

CASE No.:

v.

GEORGE LITTLE, Sec. of D.O.C. PA;
JAIME BORDER, FACILITY MGR
SCI-PHOENIX; BRITTNEY HUNER,
HEALTHCARE ADMINISTRATOR,
(CHCA); A. LETIZIO, DR. MED.
DIR. @ SCI-PHOENIX; M. SAVAGE,
ARNS (NURSE), SCI-PHOENIX;

JURY TRIAL DEMANDED

CIVIL-ACTION

SCI-PHOENIX Med. Dept.; S.
BAREL, M.D. SCI-PHOENIX; TABB
BICKELL, Exec. Dep Sec, D.O.C.; J.
YODIS, Hr. Exam. PA D.O.C.; MS.
GUTIERREZ M.A.T. Social Worker;
C. CAPMAN Dep Sec. of Admin.
DR. KRASS; Dept. Supt. Sipple;
MR. STEITCHIK MAT Supervisor;
et. seq. (ALL person NAMED acting
under Color of Law; INDIVIDUAL
& OFFICIAL CAPACITY, ET., AL.

Complaint for Violations of Civil Rights

JURISDICTION

A. This is a civil action authorized by 42 U.S.C. § 1983 to redress the deprivation, under color of State Law, of rights secured by the Constitution of the United States. The Court has jurisdiction under 28 U.S.C. § 1331 and 1343(A)(3). Plaintiff Hopkins seeks declaratory relief pursuant to 28 U.S.C. § 2201 & 2202. Plaintiff's rationale for injunctive relief is set forth *infra*, also authorized by 28 U.S.C. et. seq. and Rule 65 of the Federal Rules of Civil Procedure.

2.

P. 2.

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name

BARRY HOPKINS

All other names by which
you have been known:

BARRY CHYBINSKI JR

ID Number

QE 6473

Current Institution

SCI - PHOENIX

Address

1200 MOKYCHIC DRIVE

Collegeville

PA

19426

City

State

Zip Code

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. Make sure that the defendant(s) listed below are identical to those contained in the above caption. For an individual defendant, include the person's job or title (*if known*) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

Defendant No. 1

Name

GEORGE LITTLE

Job or Title (*if known*)

SECRETARY OF PA DOC

Shield Number

Employer

PA DEPARTMENT OF CORRECTIONS

Address

1920 TECHNOLOGY PARKWAY

MECHANICSBURG PA

17050

City

State

Zip Code



Individual capacity



Official capacity

Defendant No. 2

Name

JAIME SOBER

Job or Title (*if known*)

FACILITY MANAGER SCI-PHOENIX

Shield Number

Employer

PA DEPARTMENT OF CORRECTIONS

Address

1200 MOKYCHIC DRIVE

Collegeville

PA

19426

City

State

Zip Code



Individual capacity



Official capacity

* FOR PAGE NUMBE SEE TOP OF PG. RIGHT HAND
CORNER

Defendant No. 3

Name

BRITTNEY HUNER

Job or Title (if known)

HEALTH CARE ADMINISTRATOR (CHCA)

Shield Number

Employer

PA - DEPARTMENT OF CORRECTIONS

Address

1200 MOKYCHIC DRIVE

Collegeville

City

PA

State

19426

Zip Code



Individual capacity



Official capacity

Defendant No. 4

Name

DOCTOR A. LETIZIO

Job or Title (if known)

MEDICAL DIRECTOR @ SCI-PHOENIX

Shield Number

Employer

PA DEPARTMENT OF CORRECTIONS

Address

1200 MOKYCHIC DRIVE

Collegeville

City

PA

State

19426

Zip Code



Individual capacity



Official capacity

II. Basis for Jurisdiction

Under 42 U.S.C. § 1983, you may sue state or local officials for the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” Under *Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics*, 403 U.S. 388 (1971), you may sue federal officials for the violation of certain constitutional rights.

A. Are you bringing suit against (check all that apply):

Federal officials (a *Bivens* claim)

State or local officials (a § 1983 claim)

B. Section 1983 allows claims alleging the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” 42 U.S.C. § 1983. If you are suing under section 1983, what federal constitutional or statutory right(s) do you claim is/are being violated by state or local officials?

EIGHT AMENDMENT, FOURTEENTH AMENDMENT, EQUAL PROTECTION CLAUSE
ADA TITLE II,

C. Plaintiffs suing under *Bivens* may only recover for the violation of certain constitutional rights. If you are suing under *Bivens*, what constitutional right(s) do you claim is/are being violated by federal officials?

N/A

3A.

PG. 3A

DEFENDANT NO. 5

NAME: M. SAVAGE

JOB: ARNS (NURSE)

EMPLOYER: PA DEPARTMENT OF CORRECTIONS

ADDRESS: 1200 MOKYCHIC DRIVE
COLLEGEVILLE, PA 19426

☒ INDIVIDUAL CAPACITY

☒ OFFICIAL CAPACITY

DEFENDANT NO. 6

NAME: DR. S. BAZEL

JOB: MEDICAL DOCTOR

EMPLOYER: PA DEPARTMENT OF CORRECTIONS

ADDRESS: 1200 MOKYCHIC DRIVE
COLLEGEVILLE, PA 19426

☒ INDIVIDUAL CAPACITY

☒ OFFICIAL CAPACITY

DEFENDANT NO. 7

NAME: Tabb BICKELL

JOB: EXECUTIVE DEPUTY SECRETARY

EMPLOYER: PA DEPARTMENT OF CORRECTIONS

ADDRESS: 1920 TECHNOLOGY PARKWAY
MECHANICSBURG, PA 17050

☒ INDIVIDUAL CAPACITY

☒ OFFICIAL CAPACITY

3A

Pg. 2, 51, B

3b.

Pg. 3b

DEFENDANT NO. 8NAME: J. YODISJOB: HEARING EXAMINER @ SCI-PHOENIXEMPLOYER: PA DEPARTMENT OF CORRECTIONSAddress: 1200 MOKYCHIC DRIVE
COLLEGEVILLE, PA 19426☒ INDIVIDUAL CAPACITY ☒ OFFICIAL CAPACITYDEFENDANT NO. 9NAME: MS. GUTIEREZJOB: M.A.T SOCIAL WORKEREMPLOYER: PA DEPARTMENT OF CORRECTIONSAddress: 1200 MOKYCHIC DRIVE
COLLEGEVILLE, PA 19426☒ INDIVIDUAL CAPACITY ☒ OFFICIAL CAPACITYDEFENDANT NO. 10NAME: CHRISTOPHER OPPMANJOB: DEPUTY SECRETARY OF ADMINISTRATIONEMPLOYER: PA DEPARTMENT OF CORRECTIONSAddress: 1920 TECHNOLOGY PARKWAY
MECHANICSBURG, PA 17050☒ INDIVIDUAL CAPACITY ☒ OFFICIAL CAPACITY

Pg. 2, 51, B

3b.

- D. Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under *Bivens*, explain how each defendant acted under color of federal law. Attach additional pages if needed.

Defendants did complete and/or failed to complete their duties, as an employee/contractor for the Commonwealth of Pennsylvania Department of Corrections (SCI-Phoenix); and/or completed/failed to complete their duties while acting as independent contractor under the employ of the Pa.DOC but acting under the color of State Law, i.e. "administration of the Pa.DOC"; Acting with authority imputed via D.O.C. Policy, Rules → (CONTINUED)

III. Prisoner Status

Indicate whether you are a prisoner or other confined person as follows (check all that apply):

- ☐ Pretrial detainee
- ☐ Civilly committed detainee
- ☐ Immigration detainee
- ☒ Convicted and sentenced state prisoner
- ☐ Convicted and sentenced federal prisoner
- ☐ Other (explain) _____

IV. Statement of Claim

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

- A. If the events giving rise to your claim arose outside an institution, describe where and when they arose.

A BACKGROUND IS NECESSARY AS IS KNOWN & MEMORIALIZED by criminal history; MENTAL HEALTH; PAROLE RECORD...

- B. If the events giving rise to your claim arose in an institution, describe where and when they arose.

SEE: Addendum 1.e "Statement of the Claim" & STATEMENT OF THE CASE
SEE: Addendum: "1"
SEE: Addendum: "2" = CLAIMS

(cont. from 3-4)

II. BASIS FOR JURISDICTION

pg. 4A

D. II (CONT)

REGULATIONS, ALSO IMPUTED VIA THE PENNSYLVANIA CONSTITUTION AND LAWS OF THE COMMONWEALTH. (SEE PAGE 4 § IV; PG. 3 II D)

IV. STATEMENT OF CLAIM (continue AFTER pg. 4)

A. MEMORIALIZED by medical authorities AS WELL AS CORRECTIONS AUTHORITY providing the BASIS AND INFORMATION SUPPORTING PLAINTIFFS CLAIM:

STATEMENT OF THE CASE

A. PLAINTIFFS problems with Opiates began during INFANCY, when his mother was Addicted to heroin AT THE TIME OF his birth. (PLAINTIFF D.O.B DEC. 4, 1985 AT ST. MARY'S Hospital)

PLAINTIFFS problem with opiates (continued) wherein AT THE AGE OF THIRTEEN the effect of his exposure to heroin had reached the Plaintiff himself in the form of his own Addiction to Opiates. Beginning with prescribed narcotics i.e. Oxycontin, Oxycodone; Percocet etc... 4. "A"

ADDENDUM

CLAIMS

I PLAINTIFF DENIED HIS RIGHTS PURSUANT TO THE 8th & 14th AMENDMENTS OF THE UNITED STATES CONSTITUTION, WHEN DEFENDANTS ARBITRARILY & WITH DELIBERATE INDIFFERENCE, DEPRIVING PLAINTIFFS' A LIFE ALTERING MEDICATION CAUSING PLAINTIFF TO SUFFER WHILE DENYING HIM EVEN ADEQUATE MEDICAL CARE.

II PLAINTIFF BEING SIMILARLY SITUATED TO HIS FELLOW INMATES SOUGHT A MEDICAL MAINTENANCE PROGRAM SEEKING TO REHABILITATE A SEVERE **OUD** (OPIOID USE DISORDER) **WAS DENIED** EQUAL PROTECTION TO OBTAIN THE ADEQUATE MEDICAL CARE AS HAD HIS FELLOW INMATES.

C. What date and approximate time did the events giving rise to your claim(s) occur?

PLEASE SEE ATTACHED ADDENDUM PROCEDURAL & FACTUAL HISTORIES.
(Addendum 2)

From birth - AND 2021 when New Meds worked
i.e. Suboxone

D. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?)

THE MEDICAL ~~PERSONNEL~~ PERSONNEL I WERE REQUESTED TO DIAGNOSE & ASSIST BUT CONTINUED TO LIE & MIS-LEAD FAILING TO PROVIDE ANY MEDICAL TREATMENT, AS THEY WERE COMPLETELY AND DELIBERATELY INDIFFERENT. ALSO TREATING ME LIKE A LEPER / OR LESSER THAN THE PROCESS OF PROVIDING ME WITH A TREATMENT PLAN WAS NON-EXISTENT, NO ONE CARED DESPITE SEVERE WITHDRAW FROM CONTRABAND DRUGS READILY AVAILABLE.

V. Injuries I really needed help...

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

ALL OF THE FOLLOWING HARM IS A DIRECT RESULT OF THE EFFECTS OF THE SEVERE WITHDRAW & THEREFROM THE UNREASONABLE & IRRATIONAL THOUGHTS ONLY SERVING TO FUEL THE ADDICTION & NO CONSIDERATION FOR IMMEDIATE HEALTH CARE NEEDED; HIGH BLOOD PRESSURE / HEART DISEASE; EXTREME ANXIETY; BROKEN HAND / BROKEN NOSE; LIVER DISEASE; LIVER DAMAGE; INSOMNIA; THOUGHTS OF HARM TO OTHERS & SELF; SERIOUS CONTUSION (HEAD) FROM VOMITING; HEMORRHOIDS; BLEEDING FROM HEMORRHOIDS; ETC...

VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

CAUSE - THE D.O.C. / MEDICAL DEPT. TO FULFILL THEIR PROFESSIONAL & ETHICAL DUTIES; PROVIDING PLAINTIFF A SUBOXONE MAINTENANCE PROGRAM ESSENTIALLY REMOVING PLAINTIFF FROM ALL OF THE SYMPTOMS & MALADIES ABOVE ALLOWING PLAINTIFF TO RESTORE REASONABLENESS; RESPONSIBILITY; & ACCOUNTABILITY TO AN OTHERWISE COMPLETELY SELF-DESTRUCTIVE; IRRATIONAL & LIFE AS A RESULT OF PLAINTIFF CONTINUING TO FUEL HIS ADDICTION IN & OUT OF PRISON; GRANT MONETARY DAMAGES FOR THE EXTREME HARM (MENTAL-EMOTIONAL) AND NINE YEARS (WHILE IN PRISON) OF PHYSICAL HARM; COMPENSATORY & PUNITIVE DAMAGES ALSO CONSIDER INJUNCTIVE RELIEF, IN EXCESS OF \$75,000. PER DEFENDANT - MONETARY / COMPENSATORY; PUNITIVE; NOMINAL; & INJUNCTIVE RELIEF, IN EXCESS OF \$100,000.00 AS WELL AS SUBOXONE TREATMENT - I.E. MAINTENANCE PROGRAM.

STATEMENT OF THE CLAIMSTATEMENT OF THE FACTS

PLAINTIFF BECAME ADDICTED TO "OXYCONTIN" IN THE YEAR 2002-2003. HOWEVER, PLAINTIFF HAD BEEN ABUSING DRUGS SINCE HE WAS 12 YEARS OLD.

THE EFFECT OF OPIATE ADDICTION HAS ALSO EXPOSED PLAINTIFF TO A LIFE OF CRIME IN ORDER TO FUEL HIS ADDICTION & THEREAFTER A LIFE OF INCARCERATION.

THE FOLLOWING FACTUAL HISTORY RELATED TO THIS ACTION SUPPORTS CLAIMS BOTH OUTSIDE & INSIDE OF PRISON.

MS. GUTIERREZ

6-14-21

PLAINTIFF SUBMITTED A REQUEST TO MS. GUTIERREZ SEEKING HELP WITH HIS "OUT-OF-CONTROL" OPIOID ABUSE DISORDER. DEFENDANT ABOVE-NAMED ISSUED A RESPONSE FULL MISLEADING & INCORRECT INFORMATION, BUT A SHOT OF VIVITROL IS AVAILABLE. MOREOVER, THIS INSTITUTION PROVIDES 100-200 INMATES WITH MEDICATION PLAINTIFF SEEKS. PLAINTIFF SEEKS SUBOXONE TO DETER & BLOCK PLAINTIFF'S ATTEMPTS TO INJECT DRUGS. MOREOVER THE MISLEADING RESPONSE GAVE NO CONSIDERATION THAT PLAINTIFF SOUGHT TO USE THE SUBOXONE AS A DETERENCE AND FOR MAINTENANCE.

(CONT. FROM Addendum "1")

pg. 5b

medication which blocks Opiate Associated drugs, as well as, Opiates. The medication also RELIEVES even the most SEVERE addiction cases from withdraw & withdraw symptoms. MOREOVER, "Suboxone" is offered to many patients as "MAINTENANCE medication".

Depriving plaintiff said program/meds. ONLY serves to deprive him of his 14th & 8th Amendment rights as guaranteed by the United States Constitution. This behavior/ conduct clearly amounts to a "deliberate INDIFFERENCE"

Ms. GUTIERREZ

Ms. GUTIERREZ

6-27-21

AGAIN SENT Ms GUTIERREZ A REQUEST slip, REQUESTING her to PLACE me ON the "Opiate blocker MAINTENANCE" List. I provided her with my addiction history, as well as, the SEVERITY of it... She then ACKNOWLEDGED ~~knowing~~ of the Suboxone MAINTENANCE program. She ALSO STATED, I WAS REQUIRED to HAVE BEEN ON Suboxone PRIOR to coming to prison, ~~but~~ despite the FACT there WAS "NO M.A.T. program AT the time of plaintiff's ARREST,

(cont. Addendum)

Ms. Gutierrez

8-28-21

Plaintiff sent Ms. Gutierrez (M.A.T. social worker) request to consult with an "M.A.T. Doctor, specifically seeking to obtain help that I needed... while in prison. I was advised to put a "Medical Sick Request Slip" to talk with a doctor... / Medical Provider.

Ms. Gutierrez

9-8-21

Placed a Medical Sick Call slip in - as advised by Ms. Gutierrez. Medical personnel, Mr. Letizio advised that they would put me on the list for Suboxone, Program M.A.T.

Ms. Huner

10-19-21

Submitted a request to C.H.C.A. "B. Huner" to inform her that I had followed the advice given on 9-8-21. Of which I sought to be added to the M.A.T. program list. I was informed by a "M. Savage" that I was on the list. M. Savage was not even the person whom I wrote to.

Ms. SAVAGE

11-15-21

PLAINTIFF SOUGHT TO MEET WITH MS. SAVAGE AT THE MEDICAL CLINIC, SHE HAS BEEN ANSWERING ALL OF MY REQUESTS. I POLITELY ASKED IF HERSELF. AND THE MEDICAL CLINIC PERSONNEL STOP RUNNING ME IN CIRCLES. I REQUESTED MS. SAVAGE TO PLEASE SET ME UP WITH A CONSULT WITH DOCTOR LETIZIO.

DR. LETIZIO RESPONDED BY STATING, "I REFUSED A MEDICAL PASS IN THE PAST. HOWEVER, I DID NO SUCH THING. AGAIN ACTING IN A DELIBERATELY INDIFFERENT MANNER

Ms. SAVAGE

11-18-21

I AGAIN SENT A SICK CALL TO C.M.C.A. AND EXPLAINED I DID. AS I WAS INSTRUCTED BY MEDICAL. I STATED I HAVE A RIGHT TO ADEQUATE MEDICAL CARE PURSUANT TO THE 8TH & 14TH AMENDMENTS OF THE UNITED STATES CONSTITUTION. ACCORDINGLY, SCI-PHOENIX IS GOVERNED BY SUCH A DUTY & OBLIGATION. DR. LETIZIO FLAT OUT LIED AND I REFUSED MEDICAL ON 11/18/21, 11/20/21 & 12/1/21. I DID SEE DR. BAZEL AT THAT TIME FOR THE M.A.T. PROGRAM.

Ms. GUTIERREZ11-19-21

PLAINTIFF SUBMITTED A "REQUEST SLIP" TO MS. GUTIERREZ ("MAT" SOCIAL WORKER) AND ASKED WHEN COULD I ANTICIPATE BEGINNING TREATMENT. THE SOCIAL WORKER'S RESPONSE WHEREIN, MS GUTIERREZ INFORMED ME I HAD TO BE TAKING SUBOXONE 60 DAYS PRIOR TO MY ARREST, AND THAT TIME REQUIREMENT WAS THE ONLY WAY TO GET ON THE SUBOXONE PROGRAM. ALSO THAT VIVITROL WAS AVAILABLE BUT I MUST BE 60 DAYS PRIOR TO MY RELEASE. THIS A MISLEADING AND FALSE STATEMENT AGAIN, ADOPTING AN DELIBERATE INDIFFERENCE APPROACH.

DOCTOR BAZEL12-1-21

MET WITH DR. BAZEL DURING A "SICK CALL" REQUEST INFORMED THE DOCTOR THAT I WISHED TO BE PLACED ON THE MAT PROGRAM SINCE I HAVE HAD MULTIPLE (HOT URINES) POSITIVE URINE TESTS AND INFORMED THE DOCTOR I HAVE BEEN SELF-MEDICATING CONTRABAND SUBOXONE ALSO ADVISED THE DR. THAT WAS SUFFERING FROM WITHDRAWAL SYMPTOMS, I.E. SEVERE LOSS OF ATTENTION, FELT COMPELLED TO GET THE DRUG; I COULD NOT MAINTAIN ANY POSITIVE QUALITY OF LIFE - THE DR. COULD NOT HELP ME BUT MY COMPLAINT/CONCERN WOULD BE PASSED TO DR.

LE 71210

12-1-21

RECEIVED A RETURNED REQUEST SLIP FROM DR. BAZEL STATING THAT HE GOT A RESPONSE TO MY REQUEST FOR "O.U.D." (Opioid Use Disorder) I CURRENTLY SUFFER FROM. ALSO STATING, "DC" POLICY DOES NOT PERMIT MY PARTICIPATION. DESPITE THE FACT THAT NUMEROUS INMATES ARE CURRENTLY USING THE "MAINTENANCE" TREATMENT. I DID INFORM Drs. BAZEL & LITIZIO I CANNOT ENGAGE WITH BASIC HUMAN FUNCTION SINCE, WITHOUT TREATMENT, MY LIFE WOULD BE (IS) CENTERED UPON TRYING TO AFFORD & MAINTAIN A DAILY SOURCE FROM THE INMATE BLACK MARKET. A WHOLESALE DELIBERATE INDIFFERENCE.

C.H.C.A. HUNER

12-14-21

I REQUESTED AN INMATE Disability Accomodation FORM IN EFFORT TO OBTAIN QUALIFICATION TO PARTICIPATE IN THE PROGRAM. WHEREIN I RECEIVED THE FORM REQUESTED FROM M. SAVAGE. ("Opioid Use Disorder").

C.H.C.A. B. HUNER

2-8-22

PLAINTIFF did, IN FACT, FILE AN INMATE Disability Accommodation Request Form to C.H.C.A. B. HUNER.

C.H.C.A. HUNER

2-28-22

I RECEIVED THE INMATE Disability Accommodation Form FROM C.H.C.A. B. HUNER. THE RESPONSE STATED AS FOLLOWS: ... YOU HAVE BEEN PLACED ON M.A.T. - THE ADA (AMERICAN WITH DISABILITIES ACT) WILL NOT BE NEEDED. IT IS CLEAR THAT MEDICAL ARE ATTEMPTING TO MISLEAD. ACTING COMPLICITLY TO PROVIDE ARBITRARY RESPONSE, INFORMATION - WHOLESALE DELIBERATE INDIFFERENCE ...

M. SAVAGE

3-4-22

PLAINTIFF SENT A REQUEST SLIP TO S.C.I. PHOENIX medical Dept. requesting CONFIRMATION OF THE START DATE TO BEGIN TREATMENT. M. SAVAGE ANSWERED, STATING IT WAS FORWARDED TO C.H.C.A. HUNER.

(cont. Addendum)

pg. 5h

CHCA HUNER SAVAGE

3-17-22

PLAINTIFF SENT A REQUEST SLIP TO C.H.C.A. B. HUNER SEEKING TO LEARN WHEN TREATMENT WILL START, SINCE PLAINTIFF WAS CAUGHT IN A CYCLE OF OBSESSIVENESS & COMPULSIVENESS, AND SUFFERING. M. SAVAGE ANSWERED AND STATED IT WAS BEING FORWARDED TO CHCA B. HUNER. PLAINTIFF STATES THIS WAS A STALL TO KEEP PLAINTIFF IN A CONTINUOUS CIRCLE GOING NOWHERE.

SUPT. J. SORBER

3-21-22

PLAINTIFF RECEIVED ANSWER FROM SUPERINTENDENT J. SORBER CONCERNING INMATE Disability Accommodation Request wherein PLAINTIFF WAS INFORMED - Request went before a committee, wherein said committee merely disapproved of plaintiff's participation in the M.A.T. program. A wholly arbitrary and capricious process failing even to hear from plaintiff.

DOCTOR BAZEL

4-25-22

SENT A Request Slip to Medical FOR DR. BAZEL to INFORM THAT, C.H.C.F. B. NUNEZ INFORMED PLAINTIFF ~~THAT~~ HE HAD BEEN PLACED ON M.A.T. Program. DAWN MENYA STATED, "HELP IS COMING SINCE I WOULD BE PLACED ON M.A.T. WHEN SCHEDULING PERMITTED YOUR BLOCK TO BE NOTIFIED, STATING SHE WOULD GET ME ON THE LIST"

Doctor Letizio

4-27-22

Submitted A Request Slip to M.A.T. Program Supervisor DR. A. Letizio informed of my diligence for the past year & a half. Also reminded him of his LAWFUL duty & obligation to help addicts.

Taking Suboxone would provide A BETTER QUALITY OF LIFE WITHOUT "OBSESSION & COMPULSIVENESS ... Expressed my deep desire to get help.

Never Responded BACK...

(CONT. Addendum)

pg. 5j

SUPERINTENDENT J. SORBER

5-2-22

wrote to SUPERINTENDENT, informed Supt. of my upbringing etc... And of my addiction of Opiates, Heroin, Fentanyl, pills... Informed him I and some of my family reviewed the wonderful benefits of Suboxone treatment and maintenance to keep me from getting and pursuing the readily available drugs mentioned above. Explaining that Suboxone cannot overdose anyone; it takes away the obsessive & compulsiveness; the panic without Opiates, it removes the desire for Opiates and blocks any attempted use. I can certainly live a better life, a quality life, a gainful life.

Doctor Frost

5-9-22

wrote to the Doctor, and informed that I am suffering, not only physical but mentally/emotionally trying to hold, not lashing out. I informed of the depth of the struggle, and that I couldn't do it by myself. I don't want to be in the institutional drug game anymore, I don't want to be a criminal but a loving, kind person... I have experienced Suboxone and found it to be highly effective. NO RESPONSE

(cont. Addressing)

pg. 5K

DR. CROSS

5-9-22

I wrote him in the same manner I wrote to Doctor Frost, supra. I expressed the fact that Suboxone was already prescribed to many men - especially in a maintenance treatment program. That for the many men like myself in these institutions, we can live our lives without crime, without violence, without obsessiveness and compulsiveness - 2 horrible behaviors that ruin addicts lives. Where his life is comprised of "how do I get money so that I am not sick (withdrawing) - our entire day. No response!"

C.H.C.A. B. HUNER

5-23-22

Wrote to Health Care Administrator, Huner, asked when I start the program? Explained that, two different medical staff informed me I was on the M.A.T List - and one said I was not. Dawn Menyha told me I was not eligible for the program. This despite the fact that in total I've spent 18 yrs. of my life incarcerated, as a direct cause of Addiction!

MEDICAL DEPT. / CHCA. HUNER6-8-22

Wrote Medical Dept. with Ms. Huner, Asked when I get to meet these Doctors whom rendered decisions now affecting my Life in a most profound negative manner.

Depriving me of a medication that can save my Life. Especially by way of a MAINTENANCE program. Currently, the decisions MADE ARE arbitrary & capricious, amounting to a deliberate indifference, to my plight, my Life & a successful & gainful Life in Society.

Each and every defendant named simply pushed paper, both arbitrary and deliberately indifferent to this inmate Life.

pg. 6

VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

- A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

☒ Yes

☐ No

If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

SCI-PHOENIX 1200 MOKYCHIC DR
COLLEGEVILLE, PA 19426

FN2

- B. Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?

☒ Yes

☐ No

☐ Do not know

- C. Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?

☐ Yes

☐ No

☒ Do not know

If yes, which claim(s)?

pg. 6

FN4. BEGAN INCARCERATION AT SCI-GRATERFORD; THEN SCI-FAYETTE,
THEN SCI-FOREST & SCI-PHOENIX - PLAINTIFF HAS BEEN
SUFFERING, FOR NINE YRS. (9), THE EFFECTS OF A COMPLETELY
OUT OF CONTROL ADDICTION ALONG WITH ALL THE DESPERATE/HARMFUL
BEHAVIORS THAT DEFINE ADDICTION - INSANITY!

pg. 7

- D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?

☒ Yes

☐ No

If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

☐ Yes

☒ No

- E. If you did file a grievance:

1. Where did you file the grievance?

SCI-PHOENIX
1200 MOKYCHIC DRIVE
Collegeville, PA 19426

2. What did you claim in your grievance? THAT I AM DIANOSED WITH OPIOID USE DISORDER (OUD) AND THE DOCTOR'S HERE AT PHOENIX ARE REFUSING TO PUT ME ON NALOXONE/MAT PROGRAM. THEY ARE FAILING TO PROVIDE ME MEDICAL CARE AND I'M SUFFERING BECAUSE I'M NOT GETTING THE TREATMENT I NEED FOR MY DISEASE/DISABILITY. THEY ARE FAILING AND DENYING TO PROVIDE REASONABLE MODIFICATIONS TO THEIR POLICY SO I DON'T HAVE TO SUFFER AND CAN HAVE A ~~BETTER~~ BETTER QUALITY OF LIFE. OUD IS A DISABILITY THAT I'M IN PAIN FROM.

3. What was the result, if any? THE INITIAL RESPONSE FROM MEDICAL GRIEVANCE OFFICER (M. SAVAGE) SHE STATE MY GRIEVANCE IS DENIED (FRIVOLOUS) BUT ADMITS THAT THEIR WAS INTENTIONAL INTERFERENCE WITH GETTING ME TREATMENT IN THE PROCESS. 2ND LEVEL ANSWERED BY FACILITY MANGER. SAYS HE IS UPHOLDING THE DECISION OF THE FIRST RESPONSE. RELIEF IS DENIED.

4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)

APPEAL (1ST LEVEL) OF INITIAL FINDINGS & RATIONALE; NEXT LEVEL TO SUPERINTENDENT & FINAL LEVEL - TO DOC HEADQUARTERS IMMEDIATELY OUTSIDE OF HARRISBURG, PA (HUB OF DOC) THEREAFTER THIS INSTANT PETITION CAME ABOUT

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F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here:

N/A

2. If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:

N/A

G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.

PLAINTIFF HAS ENGAGED GREAT "DILIGENCE" IN SEEKING ONLY TO BE PROVIDED A LIFE SAVING / LIFE ALTERING MEDICATION, I.E. SUBOXONE

(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.)

VIII. Previous Lawsuits

The "three strikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without paying the filing fee if that prisoner has "on three or more prior occasions, while incarcerated or detained in any facility, brought an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent danger of serious physical injury." 28 U.S.C. § 1915(g).

To the best of your knowledge, have you had a case dismissed based on this "three strikes rule"?

☐ Yes

☒ No

If yes, state which court dismissed your case, when this occurred, and attach a copy of the order if possible.

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- A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

☐ Yes☒ No

- B. If your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)

1. Parties to the previous lawsuit

Plaintiff(s) N/A

Defendant(s) _____

2. Court (if federal court, name the district; if state court, name the county and State)

3. Docket or index number

4. Name of Judge assigned to your case

5. Approximate date of filing lawsuit

6. Is the case still pending?

☐ Yes☒ NoIf no, give the approximate date of disposition. N/A

7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)

N/A

- C. Have you filed other lawsuits in state or federal court otherwise relating to the conditions of your imprisonment?

N/A = YES
BU

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☒ Yes☐ No

D. If your answer to C is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)

1. Parties to the previous lawsuit

Plaintiff(s)

Defendant(s)

~~N/A~~ BARRY HOPKINS
 WERNORWICZ et al.

2. Court (if federal court, name the district; if state court, name the county and State)

FEDERAL ~~N/A~~ EASTERN DISTRICT PA

3. Docket or index number

~~N/A~~

4. Name of Judge assigned to your case

~~N/A~~ MITCHEL S. GOLDBERG

5. Approximate date of filing lawsuit

2017 ~~N/A~~

6. Is the case still pending?

☐ Yes☒ No

~~N/A~~

If no, give the approximate date of disposition

SETTLED 2018

7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)

~~N/A~~

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IX. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: MARCH 2, 2023

Signature of Plaintiff

Printed Name of Plaintiff

Prison Identification #

Prison Address

Barry Hopkins

Barry Hopkins

QE-6473

1200 MOKYCHIC DR

Collegeville

City

PA

State

19426

Zip Code

B. For Attorneys

Date of signing: _____

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

City

State

Zip Code

Telephone Number

E-mail Address

Barry Hopkins D.O.C No. 0E6473
S.C.I. - PHOENIX
1200 Mokychic Drive
Collegeville, PA 19426

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FOR THE
EASTERN DISTRICT OF PENNSYLVANIA
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